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Summarizing the Findings of OHCA's 2001 Household Survey

The 2001 Household Survey was conducted in Fall 2001 by the University of Connecticut Center for Survey Research and Analysis (CSRA) on behalf of the Office of Health Care Access (OHCA). It consisted of 3,985 completed interviews that explored respondents' health insurance coverage and their utilization of health care services. The survey provides a useful baseline for measuring change, because it was conducted early in the recent economic downturn just as the consequences of the labor market and related health insurance coverage were first appearing. OHCA has published six issue briefs analyzing the survey's results. Key findings are summarized below.

Insurance Coverage

			All	Children	
Insurance			Population		Population
Status	Status	Percent	Estimate	Percent	Estimate
	Uninsured at time of survey	5.6	185,200	3.9	34,000
	Uninsured for entire preceding year	3.8	124,900	1.3	11,500
	Uninsured but not for whole year	1.8	60,300	2.6	22,600
	Insured at time of survey	94.4	3,112,400	96.0	822,200
	Insured for entire preceding year	91.6	3,019,100	92.8	795,100
	Insured but not for whole year	2.8	93,300	3.2	27,100

Type of	Type	All	Children (under 19)	Working Age Adults (19 – 64)
Insurance	Employer	64.9	76.4	78.4
Coverage (%)	HUSKY/ Medicaid	4.5	13.4	3.0
	Medicare	19.1	2.3	3.8
	Public, Other	2.0	1.6	2.6
	Other Insurance	3.9	2.3	4.9
	Uninsured	5.6	4.0	7.3

 Dental insurance was widespread among children (78 percent) and working age adults (75 percent), but not among senior citizens (29 percent).

Access to Health Care Services

Utilization of Health Care Services (%)	Service	All	Children	Working Age Adults (19 – 64)	Uninsured	
	No regular source of primary care	6.1	2.2	7.5	22.5	
	In last 12 months, did not get care for:					
	Injury or illness	2.9	1.6	3.7	19.5	
	Medical emergency	1.4	1.2	1.6	9.1	

- Insurance status was the factor most strongly related to utilization of health care.
- Insurance coverage affected where people received primary care. Nearly all of the insured received primary care in a physician or HMO office, while this was true for just over half of the uninsured. One-third of the uninsured received primary care in public health clinics or hospital outpatient or walk-in centers. Nearly 10 percent of the uninsured relied upon hospital emergency departments for primary care, which creates financial and resource burdens for providers.

Who Were the Uninsured?

Low Family Income People with family incomes of less than \$30,000 made up nearly half of the uninsured and were three times as likely to be uninsured than those who earned more. Generally, as family income crossed the \$30,000 threshold, the proportion of uninsured was markedly smaller. For example, 13 percent of those with family incomes between \$20,000 and \$30,000 were uninsured, while only seven percent of those between \$30,000 and \$40,000 lacked coverage.

■ Family income was the demographic characteristic most strongly related to insurance status. When income was taken into account and people within the same income category were compared, no other social characteristic was statistically significantly related to insurance coverage.

Young Adults The uninsured tended to be young adults: Nearly two-thirds were between 19 and 44 years of age, with 41 percent between 19 and 34. Only 14 percent of the uninsured were children and, except for senior citizens, children were the least likely to be uninsured.

Not College Graduates

Three-quarters of uninsured adults did not have a college degree. Those without a degree were twice as likely to be uninsured than college graduates.

Unmarried

Among uninsured adults, 68 percent were not married. Married persons sometimes have opportunities to obtain insurance through their spouses' employers.

Gainfully Employed More than two-thirds of all uninsured working age adults were gainfully employed (i.e., either self-employed or working for someone else for a wage).

- Nearly one-third of all uninsured workers held either parttime positions or worked full-time in temporary or seasonal jobs, positions that may not be eligible for employer health coverage.
- Two-thirds of all uninsured workers were employed by small firms (50 or fewer employees), which are less likely to offer health benefits.
- Forty percent of uninsured workers reported that their employer did not offer health benefits and approximately 20 percent said they were not currently eligible for their employer's coverage.

White

Connecticut's population is overwhelmingly white (80 percent) and consequently most of the uninsured were non-Hispanic whites (69 percent). However, minorities were twice as likely to be uninsured than non-Hispanic whites.

Grant Funds Made This Survey Possible

In February 1999, the Office of Health Care Access (OHCA) was awarded a \$664,000 grant from the Robert Wood Johnson Foundation (RWJF) to research health care access in Connecticut and to analyze the overall effectiveness of the State's health care purchasing system.

As part of its ongoing research, OHCA applied for a State Planning Grant from the U.S. Department of Health and Human Services (DHHS), Health Resources and Services Administration (HRSA).

As a result, HRSA awarded OHCA a grant of \$668,000 in March 2001 to develop a plan to increase Connecticut's already high rate of health insurance coverage by identifying new coverage expansion options. A portion of that funding was used to field OHCA's 2001 Household Survey, which forms the basis for this Issues Brief.